

Appendix F
Powered Industrial Truck Operator Qualification
HS5620-LIC

This appendix is to be used with the Practical Application phase of training. The operator's Powered Industrial Truck Proficiency Instructor (PITPI) shall complete this form within 6 months of the operator completing course HS5620-CBT. The Supervisor's signature is required. If the form is not completed within the time specified, the operator shall repeat the course.

Name of proposed operator: _____

(Please Print)

Job Title: _____ Dept./Div.: _____

Employee No.: _____ Telephone No.: _____ L-Code: _____
(or Contract No.) _____

Yes No

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Is the above-named individual required to operate a Powered Industrial Truck as part of his/her job assignment? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Does this individual have a valid California driver's license? If yes, provide the license number: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Has this individual completed course HS5620-CBT. If yes, provide the date: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Has this individual been evaluated using the checklist in Appendix E, and does he/she meet the criteria to operate a Powered Industrial Truck safely? |

LLNL Supervisor: _____ L-Code: _____

(Please print)

Supervisor signature: _____

Signature of Powered Industrial Truck

Proficiency Instructor: _____

Return the completed form to the Hazards Control Department, L-386, for approval.

Signature: _____

(Authorized Hazards Control Department representative) (date)